

UNITED STATES BANKRUPTCY COURT
Eastern DISTRICT OF Pennsylvania

In re Yoan Henriquez
Debtor

Case No. 20-12166-PMM


INITIAL MONTHLY OPERATING REPORT

File report and attachments with Court and submit copy to United States Trustee within 15 days after order for relief.

Certificates of insurance must name United States Trustee as a party to be notified in the event of policy cancellation. Bank accounts and checks must bear the name of the debtor, the case number, and the designation "Debtor in Possession." Examples of acceptable evidence of Debtor in Possession Bank accounts include voided checks, copy of bank deposit agreement/certificate of authority, signature card, and/or corporate checking resolution.

REQUIRED DOCUMENTS	Document Attached	Explanation Attached
12-Month Cash Flow Projection (Form IR-1)		
Certificates of Insurance:		
Workers Compensation	N/A	
Property	X	
General Liability	N/A	
Vehicle	X	
Other:		
Identify areas of self-insurance w/liability caps		
Evidence of Debtor in Possession Bank Accounts		
Tax Escrow Account	X	
General Operating Account	X	
Money Market Account pursuant to Local Rule 4001-3 for the District of Delaware only. Refer to:	N/A	
http://www.deb.uscourts.gov/		
Other:		
Retainers Paid (Form IR-2)	X	

I declare under penalty of perjury (28 U.S.C. Section 1746) that this report and the documents attached are true and correct to the best of my knowledge and belief.



Signature of Debtor

8/2/2021

Date

Signature of Joint Debtor

Date

Signature of Authorized Individual*

Date

Printed Name of Authorized Individual

Title of Authorized Individual

*Authorized individual must be an officer, director or shareholder if debtor is a corporation; a partner if debtor is a partnership; a manager or member if debtor is a limited liability company.

FORM IR
(4/07)



H&A INSURANCE AGENCY

641 S Prince St, Lancaster, PA 17603

717-286-1616

halmaguer@allstate.com

Date: 08/02/2020

To whom may concern,

This letter certifies that Yoan Henriquez and Miraidys Pantoja had been our clients since 2019, currently they have the following open accounts with us, all of these policies are current, in effect and in good standing with our Insurance as of today:

Yoan Henriquez Universal Life: [06N1056067](#)

Yoan Disability: [4150973214](#)

Miraidys Pantoja Universal Life: [06N1056069](#)

Yoan Henriquez Home: [801489523](#)

Yoan Auto: [801489505](#)

Yoan Landord: [801489539](#)

Yoan Landord: [801489554](#)

On **July 18th of 2021** all these policies were updated with an immediate effect to reflect the following person as a trusted / additional insured:

Andre R Vara
200 Chestnut St Ste 502
Philadelphia, PA 19106

Please let me know if you have any other questions about this case.

Hermes Almaguer
717-286-1616

Thank you for doing business with us. I hope you'll remain in Good Hands® with Allstate for many years to come. We appreciate your business.



H&A Insurance
641 S Prince St
Lancaster PA 17603

Information as of July 7, 2021

Policyholder(s) Page 1 of 2

Yoan Henriquez, Miraidys P Pantoja

Policy number

801 489 554

Your Allstate agency is

H&A Insurance

(717) 286-1616

HALMAGUER@ALLSTATE.COM



YOAN HENRIQUEZ
MIRAIIDYS P PANTOJA
1001 SUFFOLK DR
LITITZ PA 17543-8270

We're Confirming Your Policy Change

Thank you for the opportunity to help take care of your insurance needs. I want to let you know that I've made the change(s) you requested to your policy.

Please look over all the information in this mailing. Inside you'll also find a guide to what's in this package and answers to some common questions.

What has changed?

The enclosed Amended Policy Declarations provides a detailed list of the coverages, coverage limits and coverage costs for your Landlords Package policy. It also shows the following changes to your policy:

A Trust/Trustee has been added as an Additional Insured.

The change took effect on 08/22/2021.

Your premium for the current policy period has not been affected.

How to contact us

Give me a call at (717) 286-1616 if you have any questions. It's my job to make sure you're in good hands.

Sincerely,

H&A Insurance
Your Allstate Agent

EP113-1



Policy number: **801 489 554**
Policy effective date: August 22, 2021

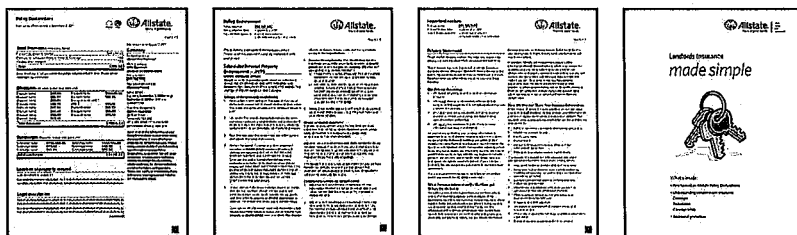
Page 2 of 2

Your Insurance Coverage Checklist

We're happy to have you as an Allstate customer! This checklist outlines what's in this package and provides answers to some basic questions, as well as any "next steps" you may need to take.

- ☐ **What's in this package?**
See the guide below for the documents that are included.
Next steps: review your *Policy Declarations* to confirm you have the coverages, coverage limits, premiums and savings that you requested and expected. Read any *Endorsements* or *Important Notices* to learn about new policy changes, topics of special interest, as well as required communications. Keep all of these documents with your other important insurance papers.
- ☐ **What about my bill?**
Unless you've already paid your premium in full, we'll send your bill separately. **Next steps:** please pay the minimum amount by the due date listed on it.
You can also pay your bill online at allstate.com or by calling 1-800-ALLSTATE (1-800-255-7828). Para español, llamar al 1-800-979-4285. If you're enrolled in the Allstate® Easy Pay Plan, we'll send you a statement detailing your payment withdrawal schedule.
- ☐ **Am I getting all the discounts I should?**
Confirm with your Allstate Agent that you're benefiting from all the discounts you're eligible to receive.
- ☐ **What if I have questions?**
You can either contact your Allstate Agent or call us 24/7 at 1-800-ALLSTATE (1-800-255-7828) - para español, llamar al 1-800-979-4285 - with questions about your coverage, or to update your coverages, limits, or deductibles. Or visit us online at allstate.com.

A guide to your amended package



Policy Declarations*

The Policy Declarations lists policy details, such as your property details and coverages.

Policy Endorsements

If changes are made to your policy, these documents will include your new contract language.

Important Notices

We use these notices to call attention to particularly important coverages, policy changes and discounts.

Insurance Made Simple

Insurance seem complicated? Our online guides explain coverage terms and features:
www.allstate.com/madesimple
Espanol.allstate.com/facildeentender

* To make it easier to see where you may have gaps in your protection, we've highlighted any coverages you do not have in the Coverage Detail section in the enclosed Policy Declarations.

Amended Landlords Package Policy Declarations



Allstate
You're in good hands.

Your policy effective date is August 22, 2021

Page 1 of 3

Total Premium for the Premium Period (Your bill will be mailed separately)

Premium for property insured \$491.86

Total \$491.86

Your bill will be mailed separately. Before making a payment, please refer to your latest bill, which includes payment options and installment fee information. If you do not pay in full, you will be charged an installment fee(s).

The portion of the total premium shown above that is attributable to coverage for losses caused by "acts of terrorism" to which the federal Program established by the "Terrorism Risk Insurance Act", as amended, applies is \$0.00. **SEE THE ENCLOSED**

"POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE" -- AP3337-4.

Discounts (included in your total premium)

Multiple Policy 35% Claim Free 1%

Location of property insured

928 Wabank St, Lancaster, PA 17603-5743

Rating Information*

Please review and verify the information regarding your insured property. Please refer to the Important Notice (X67676-4) for additional coverage information. Contact us if you have any changes.

The dwelling is of frame construction and is occupied by 1 family

Dwelling Style:

Built in 1953; 1 family; 864 sq. ft.; 1 story; condition - Satisfactory

Foundation:

Below grade basement, 100%

Interior details:

One basic kitchen

One basic full bath

Exterior wall type:

100% wood siding

Interior wall partition:

100% drywall

Heating and cooling:

Gas hot air heating, 100%

Central air - same ducts, 100%

Additional details:

Standard wood sash with glass, 100%

Interior wall height - 8 ft, 100%

Two exterior wood doors

Information as of July 7, 2021

Summary

Named Insured(s)

Yoan Henriquez, Miraidys P Pantoja

Mailing address

1001 Suffolk Dr

Lititz PA 17543-8270

Policy number

801 489 554

Your policy provided by

Allstate Indemnity Company

Policy period

Begins on **August 22, 2021** at 12:01 A.M. standard time, with no fixed date of expiration

Premium period

Beginning **August 22, 2021** through **August 22, 2022** at 12:01 A.M. standard time

Your policy change is effective **August 22, 2021**

Your Allstate agency is

H&A Insurance

641 S Prince St

Lancaster PA 17603

(717) 286-1616

HALMAGUER@ALLSTATE.COM

Some or all of the information on your Policy Declarations is used in the rating of your policy or it could affect your eligibility for certain coverages. Please notify us immediately if you believe that any information on your Policy Declarations is incorrect. We will make corrections once you have notified us, and any resulting rate adjustments, will be made only for the current policy period or for future policy periods. Please also notify us immediately if you believe any coverages are not listed or are inaccurately listed.

(continued)



Amended Landlords Package Policy Declarations

Policy number: **801 489 554**

Policy effective date: August 22, 2021

Page 2 of 3

Rating Information* (continued)

Fire department subscription - no 1 mile to fire department

Roof surface material type:

Composition

- 100% asphalt / fiberglass shingle

**This is a partial list of property details. If the interior of your property includes custom construction, finishes, buildup, specialties or systems, please contact your Allstate representative for a complete description of additional property details.*

Mortgagee

PENNYMAC LOAN SERVICES LLC ITS SUCCESSORS AND/OR ASSIGNS

P O Box 6618, Springfield, OH 45501-6618

Loan number: 8001527585

Additional Interested Party

None

Coverage detail for the property insured

Coverage	Limits of Liability	Applicable Deductible(s)
Dwelling Protection	\$166,091	▪ \$500 All peril
Other Structures Protection	\$16,610	▪ \$500 All peril
Personal Property Protection - Reimbursement Provision	\$8,305	▪ \$500 All peril
Fair Rental Income Protection	Refer to Policy	
Liability Protection	\$100,000 each occurrence	
Premises Medical Protection	\$1,000 each person	
Fire Department Charges	\$500	
Building Codes	Not purchased*	
Loss Assessments	Not purchased*	
Satellite Dish Antennas	Not purchased*	

** This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your agent to discuss available coverage options and other products and services that can help protect you.*

Amended Landlords Package Policy Declarations

Policy number:

801 489 554

Policy effective date:

August 22, 2021

Page 3 of 3



Allstate

You're in good hands.

Your policy documents

Your Landlords Package policy consists of the Policy Declarations and the following documents. Please keep them together.

- Landlords Package Policy - AS84
- Policyholder Disclosure Notice of Terrorism Insurance Coverage - AP3337-4
- Additional Insureds Endorsement - AU267
- Additional Insured - Trust - AP4494
- Standard Fire Policy Provisions - AU277-2
- Landlords Package Policy Pennsylvania Amendatory Endorsement - AS122-2

Important payment and coverage information

Here is some additional, helpful information related to your coverage and paying your bill:

- Do not pay. Mortgagee has been billed.

Allstate Indemnity Company's Secretary and President have signed this policy with legal authority at Northbrook, Illinois.

Julie Parsons

Julie Parsons
President

Susan L. Lees

Susan L. Lees
Secretary



Policy Endorsement

Policy number:

801 489 554

Policy effective date:

August 22, 2021

*The following endorsement changes your policy.
Please read this document carefully and keep it with your policy.*

Additional Insured—Trust - AP4494

I. In the **General** section, the following changes are made:

Under the **Definitions Used In This Policy** provision, the following changes are made:

1. The following definitions are added:

Trust means the entity listed under Name of Trust, below.

Trustee means the person or entity listed under Name of Trustee, below, designated by the **trust**, as the trustee of the **trust** while lawfully acting within the scope of duties as trustee with respect to the **residence premises**.

2. The definition of **insured person(s)** is replaced by the following:

5. **Insured person(s)** means:

- a) if **you** are shown on the Policy Declarations as an individual and **you** are a sole proprietor, **you** and **your** resident spouse.
- b) if **you** are shown on the Policy Declarations as a partnership or joint venture, the named partnership or joint venture, including any of its partners or members individually while acting within the course and scope of their duties in connection with the ownership, maintenance or use of the **residence premises**.
- c) if **you** are shown on the Policy Declarations as an organization other than a partnership or joint venture, the organization directors, trustees or governors of the organization while acting within the course and scope of their duties in connection with the ownership, maintenance or use of the **residence premises**.
- d) **your** employees, while acting within the course and scope of their employment in connection with the ownership, maintenance or use of the **residence premises**.
- e) any person or organization while acting as **your** real estate manager for the **residence premises**.

This policy does not apply to **bodily injury, personal injury** or **property damage** arising from the conduct of any partnership, joint venture or organization which is not named on the Policy Declarations as the insured.

Under **Section I—Your Property, Dwelling Protection—Coverage A** and **Other Structures Protection—Coverage B**, insured person also means a **trust** or **trustee**.

Under **Section I—Your Property, Personal Property Protection—Coverage C**, insured person also means a **trust** or **trustee** only with respect to **Property We Cover Under Coverage C** held solely by the **trust** at the time of loss.

Under **Section II—Liability Protection And Premises Medical Protection, Liability Protection—Coverage X**, insured person also means a **trust** or **trustee**, but only with respect to **bodily injury, personal injury** or **property damage** arising out of the operations necessary or incidental to the ownership, maintenance or use of the **residence premises**.

Under **Section II—Liability Protection And Premises Medical Protection, Premises Medical Protection—Coverage Y**, insured person also means a **trust** or **trustee**, but only with respect to **bodily injury** arising out of the operations necessary or incidental to the ownership, maintenance or use of the **residence premises**.

II. In **Section I Conditions**, the following changes are made:

A. The **Our Settlement Of Loss** provision is replaced by the following:

Our Settlement Of Loss

We will settle any covered loss with **you** and the **trust** unless another payee is named in the policy. **We** will settle within 60 days after the amount of loss is finally determined by an agreement among **you**, the **trust** and **us**, an appraisal award, or a court judgment.

B. The **No Benefit To Bailee** provision is replaced by the following:

No Benefit To Bailee

This insurance will not benefit any person or organization who may be caring for or handling **your** property for a fee. However, this provision does not apply to the **trust**.

III. In **Section II—Liability Protection And Premises Medical Protection**, under **Liability Protection—Coverage X, Losses We Do Not Cover Under Coverage X**, the following exclusions are added:

- A. **We** do not cover **bodily injury** to any employee of the **trust** or **trustee** unless the employee is performing duties arising out of and in the course of employment in connection with the maintenance or use of the **residence premises**.
- B. **We** do not cover **bodily injury, personal injury** or **property damage** arising out of any act or decision or failure to act or decide by the **trustee** in administering the **trust** other than as provided in **Section II—Liability Protection And Premises Medical Protection, Liability Protection—Coverage X**.

Name of Trust:

Andrew R Varaesquire United State Trustee

Name of Trustee:

200 Chestnut St

Mailing Address:

Suite 502 Philadelphia PA 19106

Policy endorsement

Policy number:

801 489 554

Policy effective date:

August 22, 2021

Page 2 of 3



Allstate

You're in good hands.

All other policy terms and conditions apply.



Policy endorsement

Policy number:

801 489 554

Policy effective date:

August 22, 2021

Page 3 of 3

The following endorsement changes your policy.

Please read this document carefully and keep it with your policy.

Policyholder Disclosure Notice Of Terrorism Insurance Coverage - AP3337-4

The federal Terrorism Risk Insurance Act, as amended, (the Act), establishes a temporary federal Program (the federal Program) providing for a system of shared public and private compensation for certain insured commercial property and casualty losses resulting from "acts of terrorism," as defined in the Act.

The Act, as amended in 2019, defines an "act of terrorism" as any act or acts that are certified by the Secretary of the Treasury—in consultation with the Secretary of Homeland Security, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

Your insurance coverage includes coverage for losses caused by "acts of terrorism" to which the federal Program applies. This coverage is subject to all other terms, conditions, limitations and exclusions of **your** policy.

Disclosure Of Federal Share Of Compensation For Insured Losses

Insured losses caused by "acts of terrorism" to which the federal Program applies would be partially reimbursed by the United States Government under a formula established by federal law. Under that formula, the United States Government generally reimburses 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage.

You should also know that the Act, contains a \$100 billion cap that limits United States Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses in any one calendar year exceeds \$100 billion. If the aggregate insured losses for all insurers exceed \$100 billion, **your** coverage may be reduced.

Disclosure of Premium

The portion of **your** annual premium that is attributable to coverage for losses caused by "acts of terrorism" to which the federal Program applies is \$0.00.

Important notices

Policy number: **801 489 554**
Policy effective date: August 22, 2021

Page 1 of 1



Allstate
You're in good hands.

Dwelling Profile

Your Dwelling Protection-Coverage A limit is: \$166,091

The Dwelling Protection-Coverage A limit shown above, which is based on information that you have provided to us, is also shown on the enclosed Policy Declarations for your insurance policy.

The decision regarding the limit amount applicable to your Dwelling Protection-Coverage A is your decision to make, as long as, at a minimum, you purchase a Coverage A limit equal to the estimated cost as determined by Allstate and do not exceed maximum coverage limitations established by Allstate (we will let you know if the amount of insurance that you request is greater than that which we allow).

It is important to keep in mind that the minimum Coverage A limit for which we will insure your property reflects an estimated replacement cost based on selected data that was available to us when we made this estimate (this information is described further in the "Rating Information" section of your Policy Declarations). The actual amount it will cost to replace your covered property cannot be known until after a covered total loss has occurred, so it is important that you let us know now, before a covered total loss occurs, if you would like to change your Coverage A limit.

How is the replacement cost estimated?

Many factors can affect the cost to replace your property, including age, size, and type of construction. For example, the estimated replacement cost uses construction data, such as labor and materials that are available to us when we made this estimate. This estimate is also based on characteristics of the property, which include information that you provided to us. Please note that if you have chosen to insure your dwelling for a limit that is greater than our estimate (which is the minimum amount for which we will insure your dwelling), the amount shown above actually reflects this higher amount. If you would like to make any changes to the Coverage A limit, please contact us.

Note to customers renewing their policy

The estimated replacement cost for your property may have changed since your last renewal. This is because Allstate uses the property characteristics that you have provided to us to recalculate and update the estimated replacement cost. Using updated labor and material rates for your zip code, Allstate takes the property characteristics that you have provided and determines the updated estimated replacement cost. The information about your property's characteristics is provided in the "Rating Information" section of your Policy Declarations.

Please note: Your Dwelling information is used to estimate your home replacement cost. It's important to review and update this information so we're using the most accurate details to estimate your home's replacement value.

If the information about your property shown in your Declarations requires any change or if you have any questions or concerns about the information contained in this Important Notice, please contact your Allstate representative.

X67676-4



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ALLSTATE INDEMNITY COMPANY

Calendar Date: 07/07/2021

Home Office

Policy Number: 801489554 08/22

LANCASTER, PA

Insured : YOAN HENRIQUEZ

Address : 1001 SUFFOLK DR

City : LITITZ

St.: PA Zip Code: 17543

ADD ADDITIONAL INSURED # 1

Trust/Trustee

Trust Name: ANDREW R VARAESQUIRE UNITED STATE TRUSTEE

Trustee Name: 200 CHESTNUT ST

Address: SUITE 502

City: PHILADELPHIA

State: PA

Zip: 19106

REMARKS

SUPPORT CENTER REMARKS

DUE TO NO PREMIUM CHANGE EFFECTIVE DATE HAS BEEN CHANGED FROM 07/08/2021 TO 08/22/2021

Conditions respecting Binder - Such insurance as may be bound by this service request:

1. is afforded in reliance by the Company on the statements made by the Insured;
2. shall be effective on the date, and at the time stated, but in no event sooner than such date and time.
3. is subject to the terms, exclusions and conditions of the Company's policy form, and of the forms and endorsements approved for use with such policy.
4. is limited to a period of thirty (30) days, beginning with the effective date hereof and expires at 12:01 A.M. Standard Time with respect to the designated property insurance policy on the last day of such limited period; provided, however, that the Company may sooner terminate such insurance by mailing to the Insured, at the address stated, written notice of rejection of this Service Request.

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ALLSTATE INDEMNITY COMPANY

Calendar Date: 07/07/2021

Home Office

Policy Number: 801489554 08/22

LANCASTER, PA

Insured : YOAN HENRIQUEZ

Address : 1001 SUFFOLK DR

City : LITITZ

St.: PA Zip Code: 17543

THIS REQUEST IS SUBJECT TO POLICY TERMS AND IS EFFECTIVE ONLY IF THE POLICY NOTED ABOVE IS CURRENTLY IN FORCE

Effective 11 :33 AM 07/07/2021

Policyholder's Signature

HERMES ALMAGUER

Agent/Agency Name

0A8873
Agent #

X5D
Location

(717) 286-1616
Agent's Phone #

+

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Renewal auto policy declarations

Your policy effective date is February 22, 2021



Platinum



Gold



Standard



Value Plan



Allstate

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Page 1 of 7

Total Premium for the Policy Period

Please review your insured vehicles and verify their VINs are correct.

Vehicles covered	Identification Number (VIN)	Premium
2015 Cadillac Escalade	1GYS4NKJ6FR558899	\$794.18
2007 Nissan 350Z	JN1BZ34D07M500811	501.79
2018 Mercedes-B C63 Amg	WDDWK8HB6JF633017	980.67
2017 Mercedes-B GlS450	4JGDF6EE2HA894754	722.94
Additional coverages		20.00

If you pay in installments*	\$3,019.58
If you pay in full (includes FullPay® Discount)	\$2,793.24

** Your bill will be mailed separately. Before making a payment, please refer to your latest bill, which includes payment options and installment fee information. If you do not pay in full, you will be charged an installment fee(s).*

Discounts (included in your total premium)

Allstate Easy Pay Plan	\$135.05	Safe Driving Club®	\$1,073.51
Multiple Policy	\$424.20	Responsible Payer	\$149.42
Early Signing	\$316.40	Homeowner	\$134.75
Prior Carrier	\$79.54	Allstate Auto/Life	\$66.01
Allstate eSmart®	\$285.03	Anti-theft	\$65.20
Passive Restraint	\$110.65	Antilock Brakes	\$19.60
Electronic Stability Control	\$19.60	New Car	\$84.03

Total discounts \$2,962.99

Policy discounts \$2,663.91

Allstate Easy Pay Plan	\$135.05	Homeowner	\$134.75
Safe Driving Club®	\$1,073.51	Prior Carrier	\$79.54
Multiple Policy	\$424.20	Allstate Auto/Life	\$66.01
Responsible Payer	\$149.42	Allstate eSmart®	\$285.03
Early Signing	\$316.40		

2015 Cadillac Escalade discounts \$95.31

Anti-theft	\$27.87	Passive Restraint	\$58.04
Antilock Brakes	\$4.70	Electronic Stability Control	\$4.70

(continued)

Information as of January 20, 2021

Summary

Named Insured(s)
Yoan Henriquez, Miraidys P Pantoja

Mailing address
**1001 Suffolk Dr
Lititz PA 17543-8270**

Policy number
801 489 505

Your policy provided by
Allstate Fire and Casualty Insurance Company

Policy period
Beginning **February 22, 2021** through
August 22, 2021 at 12:01 a.m. standard time

Your Allstate agency is
H&A Insurance
641 S Prince St
Lancaster PA 17603
(717) 286-1616
HALMAGUER@ALLSTATE.COM

IN ACCORDANCE WITH SECTION 1725 OF THE MOTOR VEHICLE FINANCIAL RESPONSIBILITY LAW, THIS IS TO INFORM YOU THAT COLLISION DAMAGE TO A RENTAL VEHICLE WILL BE COVERED IF: 1) THE RENTAL VEHICLE IS A FOUR WHEEL PRIVATE PASSENGER AUTOMOBILE OR A UTILITY AUTOMOBILE, AND 2) AT LEAST ONE PREMIUM FOR AUTO COLLISION COVERAGE APPEARS ON YOUR POLICY DECLARATIONS. COVERAGE WILL BE SUBJECT TO DEDUCTIBLES AND TO POLICY TERMS AND CONDITIONS, INCLUDING ANY APPLICABLE ENDORSEMENTS.



Page 2 of 7

801 489 505

Policy effective date: February 22, 2021

\$30.87

Anti-theft	\$4.33	Passive Restraint	\$20.20
Antilock Brakes	\$3.17	Electronic Stability Control	\$3.17

\$133.03

Anti-theft	\$18.93	Passive Restraint	\$16.29
Antilock Brakes	\$6.89	New Car	\$84.03
Electronic Stability Control	\$6.89		

\$39.87

Anti-theft	\$14.07	Passive Restraint	\$16.12
Antilock Brakes	\$4.84	Electronic Stability Control	\$4.84

Yoan Henriquez - Married male driver, age 35, Safe Driving Club

Miraidys Pantoja - Married female driver, age 33, Safe Driving Club

None

Renewal auto policy declarations

Policy number:

801 489 505

Policy effective date:

February 22, 2021

Page 3 of 7

**Allstate**

You're in good hands.

Coverage detail for 2015 Cadillac Escalade

Coverage	Limits	Deductible	Premium
Automobile Liability Insurance - Full Tort			
• Bodily Injury	\$100,000 each person \$300,000 each occurrence	Not applicable	\$176.84
• Property Damage	\$500,000 each occurrence	Not applicable	\$79.11
Auto Collision Insurance	Actual cash value	\$600	\$308.70
(Safe Driving Deductible Reward - deductible reduction amount available is \$400)			
Auto Comprehensive Insurance	Actual cash value	\$500	\$151.28
Rental Reimbursement	Not purchased*		
Towing and Labor Costs	\$100 each disablement	Not applicable	\$9.68
Underinsured Motorists Insurance	\$100,000 each person	Not applicable	\$20.93
Full Tort / Stacked Limits	\$300,000 each accident		
Uninsured Motorists Insurance	\$100,000 each person	Not applicable	\$11.85
Full Tort / Stacked Limits	\$300,000 each accident		
Accidental Death	\$25,000 each person	Not applicable	\$5.20
Combination Package	Not purchased*		
• Accidental Death			
• Funeral Expenses			
Extraordinary Medical	Not purchased*		
Funeral Expenses	\$2,500 each person	Not applicable	\$0.39
Income Loss			
Each person up to	\$50,000 maximum benefit	Not applicable	\$6.02
Subject to	\$2,500 monthly maximum		
Medical Expenses	\$10,000 each person	Not applicable	\$24.18
New Car Expanded Protection	Not purchased*		
Sound System	Not purchased*		
Tape	Not purchased*		
Total premium for 2015 Cadillac Escalade			\$794.18

* This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your Allstate agent to discuss coverage options and other products and services that can help protect you.

VIN 1GYS4NKJ6FR558899



Renewal auto policy declarations

Page 4 of 7

Policy number:

801489505

Policy effective date:

February 22, 2021

Coverage detail for 2007 Nissan 350Z

Coverage	Limits	Deductible	Premium
Automobile Liability Insurance - Full Tort			
▪ Bodily Injury	\$100,000 each person \$300,000 each occurrence	Not applicable	\$84.17
▪ Property Damage	\$500,000 each occurrence	Not applicable	\$76.50
Auto Collision Insurance	Actual cash value	\$600	\$152.93
(Safe Driving Deductible Reward - deductible reduction amount available is \$400)			
Auto Comprehensive Insurance	Actual cash value	\$500	\$38.96
Rental Reimbursement	Not purchased*		
Towing and Labor Costs	\$100 each disablement	Not applicable	\$9.68
Underinsured Motorists Insurance	\$100,000 each person	Not applicable	\$65.45
Full Tort / Stacked Limits	\$300,000 each accident		
Uninsured Motorists Insurance	\$100,000 each person	Not applicable	\$26.97
Full Tort / Stacked Limits	\$300,000 each accident		
Accidental Death	\$25,000 each person	Not applicable	\$5.20
Combination Package	Not purchased*		
▪ Accidental Death			
▪ Funeral Expenses			
Extraordinary Medical	Not purchased*		
Funeral Expenses	\$2,500 each person	Not applicable	\$0.39
Income Loss			
Each person up to	\$50,000 maximum benefit	Not applicable	\$10.06
Subject to	\$2,500 monthly maximum		
Medical Expenses	\$10,000 each person	Not applicable	\$31.48
New Car Expanded Protection	Not purchased*		
Sound System	Not purchased*		
Tape	Not purchased*		
Total premium for 2007 Nissan 350Z			\$501.79

* This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your Allstate agent to discuss coverage options and other products and services that can help protect you.

VIN JN1BZ34D07M500811

Renewal auto policy declarations

Policy number:

801 489 505

Policy effective date:

February 22, 2021

Page 5 of 7



Allstate
You're in good hands.

Coverage detail for 2018 Mercedes-B C63 Amg

Coverage	Limits	Deductible	Premium
Automobile Liability Insurance - Full Tort			
▪ Bodily Injury	\$100,000 each person \$300,000 each occurrence	Not applicable	\$64.24
▪ Property Damage	\$500,000 each occurrence	Not applicable	\$50.79
Auto Collision Insurance	Actual cash value	\$600	\$567.96
(Safe Driving Deductible Reward - deductible reduction amount available is \$400)			
Auto Comprehensive Insurance	Actual cash value	\$500	\$170.42
Rental Reimbursement	Not purchased*		
Towing and Labor Costs	\$100 each disablement	Not applicable	\$9.68
Underinsured Motorists Insurance	\$100,000 each person \$300,000 each accident	Not applicable	\$56.38
Full Tort / Stacked Limits			
Uninsured Motorists Insurance	\$100,000 each person \$300,000 each accident	Not applicable	\$23.23
Full Tort / Stacked Limits			
Accidental Death	\$25,000 each person	Not applicable	\$5.20
Combination Package	Not purchased*		
▪ Accidental Death			
▪ Funeral Expenses			
Extraordinary Medical	Not purchased*		
Funeral Expenses	\$2,500 each person	Not applicable	\$0.39
Income Loss			
Each person up to	\$50,000 maximum benefit	Not applicable	\$7.24
Subject to	\$2,500 monthly maximum		
Medical Expenses	\$10,000 each person	Not applicable	\$25.14
New Car Expanded Protection	Not purchased*		
Sound System	Not purchased*		
Tape	Not purchased*		
Total premium for 2018 Mercedes-B C63 Amg			\$980.67

* This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your Allstate agent to discuss coverage options and other products and services that can help protect you.

VIN WDDWK8HB6JF633017



Page 6 of 7

801 489 505

Policy effective date: February 22, 2021

Coverage	Limits	Deductible	Premium
Automobile Liability Insurance - Full Tort			
▪ Bodily Injury	\$100,000 each person \$300,000 each occurrence	Not applicable	\$76.58
▪ Property Damage	\$500,000 each occurrence	Not applicable	\$76.04
Auto Collision Insurance	Actual cash value	\$600	\$327.58
(Safe Driving Deductible Reward - deductible reduction amount available is \$400)			
Auto Comprehensive Insurance	Actual cash value	\$500	\$126.56
Rental Reimbursement	Not purchased*		
Towing and Labor Costs	\$100 each disablement	Not applicable	\$9.68
Underinsured Motorists Insurance	\$100,000 each person	Not applicable	\$48.78
Full Tort / Stacked Limits	\$300,000 each accident		
Uninsured Motorists Insurance	\$100,000 each person	Not applicable	\$20.12
Full Tort / Stacked Limits	\$300,000 each accident		
Accidental Death	\$25,000 each person	Not applicable	\$5.20
Combination Package	Not purchased*		
▪ Accidental Death			
▪ Funeral Expenses			
Extraordinary Medical	Not purchased*		
Funeral Expenses	\$2,500 each person	Not applicable	\$0.39
Income Loss			
Each person up to	\$50,000 maximum benefit	Not applicable	\$7.24
Subject to	\$2,500 monthly maximum		
Medical Expenses	\$10,000 each person	Not applicable	\$24.77
New Car Expanded Protection	Not purchased*		
Sound System	Not purchased*		
Tape	Not purchased*		
Total premium for 2017 Mercedes-B GlS450			\$722.94

*** This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your Allstate agent to discuss coverage options and other products and services that can help protect you.**

VIN 4JGDF6EE2HA894754

027 010 037
210120A301491

Renewal auto policy declarations

Policy number:

801 489 505

Policy effective date:

February 22, 2021

Page 7 of 7



Allstate

You're in good hands.

Additional coverage

The following policy coverage is also provided.

Coverage	Limits	Deductible	Premium
Identity Theft Expenses	\$25,000 per premium period	Not applicable	\$20.00
Total			\$20.00

Your policy documents

Your automobile policy consists of this Policy Declarations and the documents in the following list. Please keep these together.

- Allstate Fire and Casualty Insurance Company Auto Policy - AFA3
- PA Amendment of Policy Provisions - AU14915
- Pennsylvania Auto Amendatory Endorsement - AFA31-5
- Identity Theft Expenses-Coverage IT - AU12886
- Claim Satisfaction Guarantee Amendatory Endorsement - AP4955

Important payment and coverage information

Here is some additional, helpful information related to your coverage and paying your bill:

- ▶ Your policy reflects Allstate's Preferred Package Savings. We have applied this savings to your policy because you own a residential property and insure more than one vehicle.
- ▶ Your Platinum Protection package contains the following features:
 - Accident Waiver Enhancement Plus feature
 - Safe Driving Deductible Reward feature
 - Safe Driving Bonus feature
- ▶ **Some or all of the information on your Policy Declarations is used in the rating of your policy or it could affect your eligibility for certain coverages. Please notify us immediately if you believe that any information on your Policy Declarations is incorrect. We will make corrections once you have notified us, and any resulting rate adjustments, will be made only for the current policy period or for future policy periods. Please also notify us immediately if you believe any coverages are not listed or are inaccurately listed.**

Allstate Fire and Casualty Insurance Company's Secretary and President have signed this policy with legal authority at Northbrook, Illinois.

Julie Parsons

Julie Parsons
President

Susan L. Lees

Susan L. Lees
Secretary



Allstate Lienholder Service Center
PO Box 660349
Dallas, TX 75266-0349



ANDREW R VARA
200 CHESTNUT ST STE 502
PHILADELPHIA PA 19106-2912

Effective date of certificate:

July 8, 2021

Page 1 of 2

Policyholder:

**YOAN HENRIQUEZ, MIRAI DYS P
PANTOJA**

1001 SUFFOLK DR
LITITZ PA 17543-8270

Policy number

801489505

Allstate Insurance Company

Northbrook, Illinois, certifies that
the following insurance is in force:

Policy period:

Beginning **February 22, 2021**

through **August 22, 2021**

at 12:01 a.m. standard time

Certificate of Insurance

The person or organization designated below is described in the policy as:

ANDREW R VARA
200 CHESTNUT ST SUITE 502
PHILADELPHIA, PA 19106-2912

☐ **Lienholder**
(Loss Payable Clause)
☒ **Additional Interested Party**

Agent:
H&A INSURANCE
(717) 286-1616

Coverages designated below are afforded for each described vehicle:

Item	VIN	Limit of liability	Deductible
2015 ESCALADE	1GYS4NKJ6FR558899	BI Each Person \$100,000 Each Occurrence \$300,000 PD Each Occurrence \$500,000	
• Collision			\$600
• Comprehensive			\$500
2007 350Z	JN1BZ34D07M500811	BI Each Person \$100,000 Each Occurrence \$300,000 PD Each Occurrence \$500,000	
• Collision			\$600
• Comprehensive			\$500
2018 C63 AMG	WDDWK8HB6JF633017	BI Each Person \$100,000 Each Occurrence \$300,000 PD Each Occurrence \$500,000	
• Collision			\$600
• Comprehensive			\$500

See reverse side for provisions concerning Loss Payable Clause and Additional Interested Party.

This Certificate of Insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded by the policy referred to above.

Date: 07/07/21

DI697



Certificate of Insurance

Page 2 of 2

Allstate Insurance Company

Policy number:

801 489 505

The Loss Payable Clause of such policy provides:

"The company reserves the right to cancel such policy at any time as provided by its terms, but in such case the company shall notify the Lienholder when not less than ten days thereafter such cancellation shall be effective as to the interest of said Lienholder therein and the company shall have the right, on like notice, to cancel this agreement."

The Additional Interest Endorsement of such policy, in part, provides:

"...such insurance as is afforded by the policy" for automobile liability insurance listed on the reverse side hereof applies also to the person or organization named as Additional Interested Party. "As respects such...interest, no cancellation...and no endorsement...adversely affecting such additional interest, shall be effective until ten (10) days following the mailing of written notice (to the person or organization) of such cancellation or endorsement..."

Allstate Lienholder Service Center
PO Box 660349
Dallas, TX 75266-0349



ANDREW R VARA
200 CHESTNUT ST STE 502
PHILADELPHIA PA 19106-2912

Effective date of certificate:

July 8, 2021

Page 1 of 2

Policyholder:

**YOAN HENRIQUEZ, MIRAI DYS P
PANTOJA**

1001 SUFFOLK DR
LITITZ PA 17543-8270

Policy number

801 489 505

Allstate Insurance Company

Northbrook, Illinois, certifies that
the following insurance is in force:

Policy period:

Beginning **February 22, 2021**

through **August 22, 2021**

at 12:01 a.m. standard time

Certificate of Insurance

The person or organization designated below is described in the policy as:

ANDREW R VARA
200 CHESTNUT ST SUITE 502
PHILADELPHIA, PA 19106-2912

☐ Lienholder
(Loss Payable Clause)
☒ **Additional Interested Party**

Agent:
H&A INSURANCE
(717) 286-1616

Coverages designated below are afforded for each described vehicle:

Item	VIN	Limit of liability	Deductible
2017 GLS450	4JGDF6EE2HA894754	BI Each Person \$100,000 Each Occurrence \$300,000 PD Each Occurrence \$500,000	
▪ Collision			\$600
▪ Comprehensive			\$500

See reverse side for provisions concerning Loss Payable Clause and Additional Interested Party.

This Certificate of Insurance neither affirmatively nor negatively amends, extends or alters the coverage afforded by the policy referred to above.

Date: 07/07/21

DI697



Certificate of Insurance

Page 2 of 2

Allstate Insurance Company

Policy number:

801 489 505

The Loss Payable Clause of such policy provides:

"The company reserves the right to cancel such policy at any time as provided by its terms, but in such case the company shall notify the Lienholder when not less than ten days thereafter such cancellation shall be effective as to the interest of said Lienholder therein and the company shall have the right, on like notice, to cancel this agreement."

The Additional Interest Endorsement of such policy, in part, provides:

"...such insurance as is afforded by the policy" for automobile liability insurance listed on the reverse side hereof applies also to the person or organization named as Additional Interested Party. "As respects such...interest, no cancellation...and no endorsement...adversely affecting such additional interest, shall be effective until ten (10) days following the mailing of written notice (to the person or organization) of such cancellation or endorsement..."

#

#

ALLSTATE FIRE AND CASUALTY INSURANCE COMPANY

Calendar Date: 07/07/2021

Home Office

Policy Number: 801489505 08/22

Northbrook, Illinois

Insured : YOAN HENRIQUEZ

Address : 1001 SUFFOLK DR

City : LITITZ

St.: PA Zip Code: 17543

CHANGE INTERESTED PARTY # 1

Name: ANDREW R VARA

Address: 200 CHESTNUT ST SUITE 502

City: PHILADELPHIA

State: PA

Zip: 19106

REMARKS HO VALIDATED BY CI

HOME OWNERSHIP WAS VALIDATED BY THE NEW OR EXISTING CROSS INDEXED POLICY.

THIS REQUEST IS SUBJECT TO POLICY TERMS AND IS EFFECTIVE ONLY IF THE POLICY NOTED ABOVE IS CURRENTLY IN FORCE

Effective 11 : 44 A.M. 07/07/2021

Policyholder's Signature

HERMES ALMAGUER

Agent/Agency Name

0A8873

Agent #

X5D

Location

(717) 286-1616

Agent's Phone #

AR1871

+

+



H&A Insurance
641 S Prince St
Lancaster PA 17603

Information as of July 7, 2021

Policyholder(s) Page 1 of 2

**Miraidys Pantoja Roque, Yoan
Henriquez**

Policy number

801 489 523

Your Allstate agency is

H&A Insurance

(717) 286-1616

HALMAGUER@ALLSTATE.COM



MIRAIIDYS PANTOJA ROQUE
1001 SUFFOLK DR
LITITZ PA 17543-8270

We're Confirming Your Policy Change

We made a change to your policy, which took effect on 08/22/2021.

What has changed?

The enclosed Amended Policy Declarations reflects this change.

The coverages and limits you carry for your property, and the costs of those coverages, are listed in detail on the enclosed Amended Policy Declarations. You can see the specific changes to your policy by comparing this Policy Declarations to the most recent Policy Declarations mailed to you. Inside you'll also find a guide to what's in this package and answers to some common questions.

How to contact us

Give me a call at (717) 286-1616 if you have any questions. It's my job to make sure you're in good hands.

Sincerely,

H&A Insurance
Your Allstate Agent

EP27-2



Policy number: **801 489 523**
Policy effective date: August 22, 2021

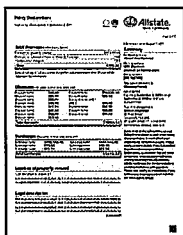
Page 2 of 2

Your Insurance Coverage Checklist

We're happy to have you as an Allstate customer! This checklist outlines what's in this package and provides answers to some basic questions, as well as any "next steps" you may need to take.

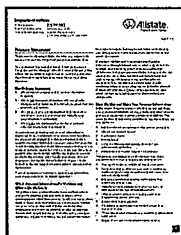
- ☐ **What's in this package?**
See the guide below for the documents that are included.
Next steps: review your *Policy Declarations* to confirm you have the coverages, coverage limits, premiums and savings that you requested and expected. Read any *Endorsements* or *Important Notices* to learn about new policy changes, topics of special interest, as well as required communications. Keep all of these documents with your other important insurance papers.
- ☐ **What about my bill?**
Unless you've already paid your premium in full, we'll send your bill separately. **Next steps:** please pay the minimum amount by the due date listed on it.
You can also pay your bill online at allstate.com or by calling 1-800-ALLSTATE (1-800-255-7828). Para español, llamar al 1-800-979-4285. If you're enrolled in the Allstate® Easy Pay Plan, we'll send you a statement detailing your payment withdrawal schedule.
- ☐ **Am I getting all the discounts I should?**
Confirm with your Allstate Agent that you're benefiting from all the discounts you're eligible to receive.
- ☐ **What if I have questions?**
You can either contact your Allstate Agent or call us 24/7 at 1-800-ALLSTATE (1-800-255-7828) - para español, llamar al 1-800-979-4285 - with questions about your coverage, or to update your coverages, limits, or deductibles. Or visit us online at allstate.com.

A guide to your amended package



Policy Declarations*

The Policy Declarations lists policy details, such as your property details and coverages.



Important Notices

We use these notices to call attention to particularly important coverages, policy changes and discounts.



Insurance Made Simple

Insurance seem complicated? Our online guides explain coverage terms and features:
www.allstate.com/madesimple
Espanol.allstate.com/facildeentender

* To make it easier to see where you may have gaps in your protection, we've highlighted any coverages you do not have in the Coverage Detail section in the enclosed Policy Declarations.

Amended House & Home Policy Declarations

Your policy effective date is August 22, 2021



Page 1 of 3

Total Premium for the Policy Period

Premium for property insured \$1,352.17

Total \$1,352.17

Discounts (included in your total premium)

Protective Device	\$38.92	Multiple Policy	\$496.79
Claim Free	\$205.85	Home Buyer	\$5.63
Early Signing	\$86.63	Loyalty	\$124.04
Responsible Payment	\$406.53		

Total discount savings \$1,364.39

Insured property details*

Please review and verify the information regarding your insured property. Please refer to the Important Notice (X73182-1) for additional coverage information. Contact us if you have any changes.

Location of property insured: 1001 Suffolk Dr, Lititz, PA 17543-8270

Location zone: PA7543

Your location zone is based on the location of the insured property and is one of many factors used in determining your rate.

Dwelling Style:

Built in 2005; 1 family; 3109 sq. ft.; colonial - 2 stories

Foundation:

Below grade basement, 100%

Attached structure:

Attached garage, 827 sq. ft.

Interior details:

One builders grade kitchen One gas fireplace
Four builders grade full baths One softwood straight staircase

Exterior wall type:

100% vinyl siding

Interior wall partition:

100% drywall

Heating and cooling:

Gas hot air heating, 100% Central air - same ducts, 100%

Additional details:

Standard wood sash with glass, 100% Interior wall height - 8 ft, 100%
Two exterior wood doors

Information as of July 7, 2021

Summary

Named Insured(s)

Miraidys Pantoja Roque, Yoan Henriquez

Mailing address

**1001 Suffolk Dr
Lititz PA 17543-8270**

Policy number

801 489 523

Your policy provided by
**Allstate Vehicle and Property
Insurance Company**

Policy period

Beginning **August 22, 2021** through
August 22, 2022 at 12:01 a.m. standard
time

Your Allstate agency is

H&A Insurance
641 S Prince St
Lancaster PA 17603
(717) 286-1616
HALMAGUER@ALLSTATE.COM

Some or all of the information on your Policy Declarations is used in the rating of your policy or it could affect your eligibility for certain coverages. Please notify us immediately if you believe that any information on your Policy Declarations is incorrect. We will make corrections once you have notified us, and any resulting rate adjustments, will be made only for the current policy period or for future policy periods. Please also notify us immediately if you believe any coverages are not listed or are inaccurately listed.

(continued)

PA070AMD



Amended House & Home Policy Declarations

Page 2 of 3

Policy number: **801 489 523**

Policy effective date: August 22, 2021

Insured property details* (continued)**Fire protection details:**

Fire department subscription - no 2 miles to fire department

Roof surface material type:

Composition

▪ 100% asphalt / fiberglass shingle

Roof details:

Predominant roof type: Composition Age of roof - 6 years

Roof geometry - Gable

Mortgagee

WELLS FARGO BANK NA 936 ITS SUCCESSORS &/OR ASSIGNS

P O Box 100515, Florence, SC 29502-0515

Loan number: 0593062649

Additional Interested Party:

Andrew R Vara Esquire United State Trustee

200 Chestnut St Suite 502, Philadelphia, PA 19106-2912

**This is a partial list of property details. If the interior of your property includes custom construction, finishes, buildup, specialties or systems, please contact your Allstate representative for a complete description of additional property details.*

Coverage detail for the property insured

Coverage	Limits of Liability	Applicable Deductible(s)
Dwelling Protection	\$565,409	<ul style="list-style-type: none"> ▪ \$1,000 Windstorm and Hail ▪ \$1,000 All other perils
Other Structures Protection	\$113,082	<ul style="list-style-type: none"> ▪ \$1,000 Windstorm and Hail ▪ \$1,000 All other perils
Personal Property Protection	\$395,787	<ul style="list-style-type: none"> ▪ \$1,000 Windstorm and Hail ▪ \$1,000 All other perils
Additional Living Expense	Up to 24 months not to exceed \$113,082	
Family Liability Protection	\$300,000 each occurrence	
Guest Medical Protection	\$5,000 each person	
Building Codes	\$56,541	
Building Structure Reimbursement Extended Limits	Not purchased*	
Roof Surfaces Extended Coverage	Included	
Water Back-Up	\$5,000	<ul style="list-style-type: none"> ▪ \$500 Water Back-Up

Amended House & Home Policy Declarations

Policy number:

801 489 523

Policy effective date:

August 22, 2021

Page 3 of 3



Allstate

You're in good hands.

► **Other Coverages Not Purchased:**

- Additional Fire Department Charges*
- Building Materials Theft*
- Dwelling in the Course of Construction*
- Electronic Data Recovery*
- Extended Coverage on Cameras*
- Extended Coverage on Jewelry, Watches and Furs*
- Extended Coverage on Musical Instruments*
- Extended Coverage on Sports Equipment*
- Extended Premises*
- Fair Rental Income*
- Golf Cart*
- Green Improvement*
- Home Day Care*
- Identity Theft Expenses*
- Increased Coverage on Business Property*
- Increased Coverage on Theft of Silverware*
- Loss Assessments*
- Oil Storage Tank(s)*
- Secondary Residence*
- Select Value*
- Yard and Garden*

*** This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your agent to discuss available coverage options and other products and services that can help protect you.**

Scheduled Personal Property Coverage

Your policy does not include Scheduled Personal Property Coverage. This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your agent to discuss available coverage options and other products and services that can help protect you.

Your policy documents

Your House & Home policy consists of the Policy Declarations, any Policy Declarations Addendum, and the following documents. Please keep them together.

- Pennsylvania House & Home Policy - AVP58
- Amendatory Endorsement - AVP381
- Windstorm and Hail Deductible Endorsement - AVP82
- Additional Insured - Trust Endorsement - AVP8
- Water Back-Up Endorsement - AVP258
- Roof Surfaces Extended Coverage Endorsement - AVP42
- Sinkhole Activity Coverage Endorsement - AVP315
- Pennsylvania Amendatory Endorsement - AVP354
- Amendatory Endorsement - AVP554

Important payment and other information

Here is some additional, helpful information related to your coverage and paying your bill:

- The Property Insurance Adjustment condition applies using the Marshall Swift Boeckh Publications building cost index.
- Do not pay. Mortgagee has been billed.

Allstate Vehicle and Property Insurance Company's Secretary and President have signed this policy with legal authority at Northbrook, Illinois.

Julie Parsons

Julie Parsons
President

Susan L. Lees

Susan L. Lees
Secretary



Important notices

Policy number: **801 489 523**
Policy effective date: August 22, 2021

Your Estimated Home Replacement Cost

Allstate has determined that the estimated cost to replace your home is: \$565,409.

We based your estimated cost on information provided by you and selected data that was available to us, which is described in the "Insured property details" section of your Policy Declarations. Please review all the information in this section to ensure the accuracy of the information used to determine the estimated replacement cost of your home.

The enclosed Policy Declarations shows the limit of liability applicable to Dwelling Protection-Coverage A of your homeowners insurance policy. The estimated replacement cost of your home is the minimum amount for which we will insure your home.

The decision regarding the limit applicable to your Dwelling Protection-Coverage A is your decision to make, as long as, at a minimum, your limit equals the estimated replacement cost as determined by Allstate and does not exceed maximum coverage limitations established by Allstate.

It is important to keep in mind that your Coverage A limits reflect a replacement cost that is only an estimate based on data that was available to us when we made this estimate (this information is described in the "Insured property details" section of your Policy Declarations). The actual amount it will cost to replace your home cannot be known until after a covered total loss has occurred. Please keep in mind that we do not guarantee the adequacy of the estimate to cover any future loss(es).

How Is the Replacement Cost Estimated?

Many factors can affect the cost to replace your home, including its age, size, and type of construction. For example, the replacement cost uses construction data, such as labor and materials, that are available to us when we made this estimate. This estimate is also based on characteristics of the home, which include information that you provided to us. You might have chosen to insure your home for a higher amount than the estimated replacement cost shown above.

Note to Customers Renewing Their Policy

The estimated replacement cost for your home may have changed since the last time we communicated this information to you. This is because, at renewal, Allstate uses the home characteristics that you have provided to us to recalculate and update the estimated replacement cost. Using updated labor and material rates for your zip code, Allstate takes the home characteristics you have provided and determines the updated estimated replacement cost. The information about your

home's characteristics is provided in the "Insured property details" section of your Policy Declarations.

Please note: Your Dwelling information is used to estimate your home replacement cost. It's important to review and update this information so we're using the most accurate details to estimate your home's replacement value.

If the information about your home shown in your Policy Declarations requires any change or if you have any questions or concerns about the information contained in this Important Notice, please contact your Allstate representative, or call us at 1-800-ALLSTATE.

X73182-1

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ALLSTATE VEHICLE AND PROPERTY INSURANCE COMPANY

Calendar

Date: 07/07/2021

Home Office

Policy Number: 801489523 08/22

Northbrook, Illinois

Insured : MIRAI DYS PANTOJA ROQUE

Address : 1001 SUFFOLK DR

City : LITITZ

St.: PA Zip Code: 17543

REMARKS

SUPPORT CENTER REMARKS

DUE TO NO PREMIUM CHANGE EFFECTIVE DATE HAS BEEN CHANGED FROM 07/09/2021 TO 08/22/2021

Conditions respecting Binder - Such insurance as may be bound by this service request:

1. is afforded in reliance by the Company on the statements made by the Insured;
2. shall be effective on the date, and at the time stated, but in no event sooner than such date and time.
3. is subject to the terms, exclusions and conditions of the Company's policy form, and of the forms and endorsements approved for use with such policy.
4. is limited to a period of thirty (30) days, beginning with the effective date hereof and expires at 12:01 A.M. Standard Time with respect to the designated property insurance policy on the last day of such limited period; provided, however, that the Company may sooner terminate such insurance by mailing to the Insured, at the address stated, written notice of rejection of this Service Request.

THIS REQUEST IS SUBJECT TO POLICY TERMS AND IS EFFECTIVE ONLY IF THE POLICY NOTED ABOVE IS CURRENTLY IN FORCE

Effective 11 : 57 A.M. 07/07/2021

Policyholder's Signature

HERMES ALMAGUER

Agent/Agency Name

0A8873

Agent #

X5D

Location

(717) 286-1616

Agent's Phone #

AR417

+

+

Alliance Menu | My Transactions | Help

Homeowners - Endorsement

Agent ID: A0A8873

Agency: HERMES ALMAGUER

Producer ID: A0A8873

Add/View Transaction Remarks

Save

Delete

Exit

Effective Date is prior to Last Endorsement Effective Date.

Insured: MIRAIIDYS PANTOJA ROQUE

Homeowners Policy: 801489523 08/22

Rating State: PA

Effective Date: 07/07/2021

Status: ACTIVE

Policy Type: House and Home

1 Household/Occupants

2

3

4

Effective Date

Edit

Effective Date: 07/07/2021 12:00 A.M.

Last Endorsement Effective Date: 08/22/2021

Contact and Residence Information

Edit

Named Insured:

MIRAIIDYS PANTOJA ROQUE

Mailing Address:

1001 SUFFOLK DR
LITITZ, PA 17543

Insured Property Address:

Same

Occupants

Add

Primary Insured MIRAIIDYS PANTOJA ROQUE

09/08/1987

Edit

Remove

Spouse YOAN HENRIQUEZ

08/28/1985

Edit

Remove

Children in Household

Add

Household Details

Edit

Additional Insured

Add

Trust/Trustee

ANDREW R VARAESQUIRE UNITED
STATE TRUSTEE

Undo

* Type:

Trust/Trustee

* Trust Name:

ANDREW R VARAESQUIRE UNITED STATE
TRUSTEE

* Trustee Name(s):

200 CHESTNUT ST

* Address:

SUITE 502

* City:

PHILADELPHIA

* State:

PA

* Zip:

19106

Vehicle Information

Edit

Cross Index

Add



* Policy/Control Number	* Effective Date (MM / DD)	* Line Code	* Company	* Relationship	
0000076N1056069	11/14	80 Life	Allstate Financial	Auto/Life Discount Qualifies	Remove
0000076N1056069	11/14	80 Life	Allstate Financial	Multi-Tier	Remove
801489539	08/22	72 Landlords	60 AI	Multi-Tier	Remove
801489505	08/22	10 Auto	27 AFCIC	Multi-Tier	Remove

Print

Save Delete Exit

Alliance Menu | My Transactions | Help

Homeowners - Endorsement

Agent ID: A0A8873

Agency: HERMES ALMAGUER

Producer ID: A0A8873

Add/View Transaction Remarks

Save

Delete

Exit

Effective Date is prior to Last Endorsement Effective Date.

Insured: MIRADYS PANTOJA ROQUE

Homeowners Policy: 801489523 08/22

Rating State: PA

Effective Date: 07/07/2021

Status: ACTIVE

Policy Type: House and Home

1 ☐ 2 ☒ Dwelling 3 ☐ 4 ☐

* Required

Insured Property Details

Edit

Replacement Cost

Edit

Dwelling

* Year Built: 2005

* Year Roof Installed: 2015

* Construction Type: Fire Resistant - Not 100%

* Roof Geometry: Gable

Does the residence have a certified hail resistant roof? No

* Type of Residence: Single Family Residence

View/Update the Residential Component Technology™ estimator? No

* Dwelling Coverage Amount: \$565400

Town Class

Edit

* Miles to Responding Fire Department: 0.2

* Responding Fire Department: MAHEIM TS

County: LANCASTER

City Code: 043

Protective Devices

Edit

☒ Dead-bolt Locks

☐ Local Burglar Alarm

☐ Partial Home Sprinkler System

☒ Smoke Detector

☐ Central Burglar Alarm

☐ Complete Home Sprinkler System

☒ Fire Extinguisher

☐ Local Fire Alarm

☐ Central Fire Alarm

Mortgagee/Third Party

Add

Directory Code Name

ANDREW R VARA ESQUIRE
UNITED STATE TRUSTEE

Address

200 CHESTNUT ST SUITE
502 PHILADELPHIA, PA
19106

Loan Number Type

Additional
Interested
Party

Edit

Remove

007596

WELLS FARGO BANK NA
936 ITS SUCCESSORS
&/OR ASSIGNS

P O BOX 100515
FLORENCE, SC 29502

0593062649 First
Mortgagee

Edit

Remove



H&A Insurance
641 S Prince St
Lancaster PA 17603

Information as of July 7, 2021

Policyholder(s) Page 1 of 2

Yoan Henriquez, Miraidys P Pantoja

Policy number

801 489 539

Your Allstate agency is

H&A Insurance

(717) 286-1616

HALMAGUER@ALLSTATE.COM



YOAN HENRIQUEZ
MIRAIIDYS P PANTOJA
1001 SUFFOLK DR
LITITZ PA 17543-8270

We're Confirming Your Policy Change

Thank you for the opportunity to help take care of your insurance needs. I want to let you know that I've made the change(s) you requested to your policy.

Please look over all the information in this mailing. Inside you'll also find a guide to what's in this package and answers to some common questions.

What has changed?

The enclosed Amended Policy Declarations provides a detailed list of the coverages, coverage limits and coverage costs for your Landlords Package policy. It also shows the following changes to your policy:

A Trust/Trustee has been added as an Additional Insured.

The change took effect on 08/22/2021.

Your premium for the current policy period has not been affected.

How to contact us

Give me a call at (717) 286-1616 if you have any questions. It's my job to make sure you're in good hands.

Sincerely,

H&A Insurance
Your Allstate Agent

EP113-1



Policy number:

801 489 539

Page 2 of 2

Policy effective date:

August 22, 2021

Your Insurance Coverage Checklist

We're happy to have you as an Allstate customer! This checklist outlines what's in this package and provides answers to some basic questions, as well as any "next steps" you may need to take.

☐ **What's in this package?**

See the guide below for the documents that are included.

Next steps: review your *Policy Declarations* to confirm you have the coverages, coverage limits, premiums and savings that you requested and expected. Read any *Endorsements* or *Important Notices* to learn about new policy changes, topics of special interest, as well as required communications. Keep all of these documents with your other important insurance papers.

☐ **What about my bill?**

Unless you've already paid your premium in full, we'll send your bill separately. **Next steps:** please pay the minimum amount by the due date listed on it.

You can also pay your bill online at allstate.com or by calling 1-800-ALLSTATE (1-800-255-7828). Para español, llamar al 1-800-979-4285. If you're enrolled in the Allstate® Easy Pay Plan, we'll send you a statement detailing your payment withdrawal schedule.

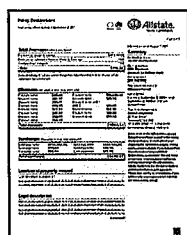
☐ **Am I getting all the discounts I should?**

Confirm with your Allstate Agent that you're benefiting from all the discounts you're eligible to receive.

☐ **What if I have questions?**

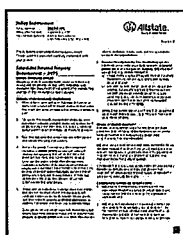
You can either contact your Allstate Agent or call us 24/7 at 1-800-ALLSTATE (1-800-255-7828) - para español, llamar al 1-800-979-4285 - with questions about your coverage, or to update your coverages, limits, or deductibles. Or visit us online at allstate.com.

A guide to your amended package



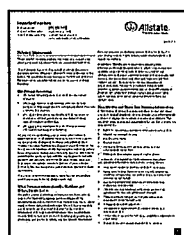
Policy Declarations*

The Policy Declarations lists policy details, such as your property details and coverages.



Policy Endorsements

If changes are made to your policy, these documents will include your new contract language.



Important Notices

We use these notices to call attention to particularly important coverages, policy changes and discounts.



Insurance Made Simple

Insurance seem complicated? Our online guides explain coverage terms and features: www.allstate.com/madesimple
Espanol.allstate.com/facildeentender

* To make it easier to see where you may have gaps in your protection, we've highlighted any coverages you do not have in the Coverage Detail section in the enclosed Policy Declarations.

Amended Landlords Package Policy

Declarations



Allstate
You're in good hands.

Your policy effective date is August 22, 2021

Page 1 of 3

Total Premium for the Premium Period (Your bill will be mailed separately)

Premium for property insured \$565.02

Total \$565.02

Your bill will be mailed separately. Before making a payment, please refer to your latest bill, which includes payment options and installment fee information. If you do not pay in full, you will be charged an installment fee(s).

The portion of the total premium shown above that is attributable to coverage for losses caused by "acts of terrorism" to which the federal Program established by the "Terrorism Risk Insurance Act", as amended, applies is \$0.00. **SEE THE ENCLOSED "POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE" -- AP3337-4.**

Discounts (included in your total premium)

Multiple Policy 35% Claim Free 1%

Location of property insured

426 Parkwynne Rd, Lancaster, PA 17601-2820

Rating Information*

Please review and verify the information regarding your insured property. Please refer to the Important Notice (X67676-4) for additional coverage information. Contact us if you have any changes.

The dwelling is of frame construction and is occupied by 1 family

Dwelling Style:

Built in 1976; 1 family; 1296 sq. ft.; 2 stories; condition - Satisfactory

Foundation:

Below grade basement, 100% Standard finish, 64%

Attached structure:

Attached garage, 360 sq. ft.

Detached structure:

One small concrete swimming pool

Interior details:

One builders grade kitchen One softwood straight staircase
One builders grade full bath

Exterior wall type:

100% aluminum siding

Interior wall partition:

100% drywall

Information as of July 7, 2021

Summary

Named Insured(s)

Yoan Henriquez, Miraidys P Pantoja

Mailing address

1001 Suffolk Dr

Lititz PA 17543-8270

Policy number

801 489 539

Your policy provided by

Allstate Indemnity Company

Policy period

Begins on **August 22, 2021** at 12:01 A.M. standard time, with no fixed date of expiration

Premium period

Beginning **August 22, 2021** through **August 22, 2022** at 12:01 A.M. standard time

Your policy change is effective **August 22, 2021**

Your Allstate agency is

H&A Insurance

641 S Prince St

Lancaster PA 17603

(717) 286-1616

HALMAGUER@ALLSTATE.COM

Some or all of the information on your Policy Declarations is used in the rating of your policy or it could affect your eligibility for certain coverages. Please notify us immediately if you believe that any information on your Policy Declarations is incorrect. We will make corrections once you have notified us, and any resulting rate adjustments, will be made only for the current policy period or for future policy periods. Please also notify us immediately if you believe any coverages are not listed or are inaccurately listed.

(continued)



Policy number:

801 489 539

Policy effective date:

August 22, 2021

Rating Information* (continued)**Heating and cooling:**

Central air - same ducts, 100% One electric heat pump

Additional details:

Standard wood sash with glass, 100% Interior wall height - 8 ft, 100%

Two exterior wood doors

Fire department subscription - no 3 miles to fire department

Roof surface material type:

Composition

▪ 100% asphalt / fiberglass shingle

**This is a partial list of property details. If the interior of your property includes custom construction, finishes, buildup, specialties or systems, please contact your Allstate representative for a complete description of additional property details.*

Mortgagee

NATIONSTAR MORTGAGE LLC ITS SUCCESSORS &/OR ASSIGNS

P O Box 7729, Springfield, OH 45501-7729

Loan number: 0682003322

Additional Interested Party

None

Coverage detail for the property insured

Coverage	Limits of Liability	Applicable Deductible(s)
Dwelling Protection	\$230,426	▪ \$500 All peril
Other Structures Protection	\$23,043	▪ \$500 All peril
Personal Property Protection - Reimbursement Provision	\$11,522	▪ \$500 All peril
Fair Rental Income Protection	Refer to Policy	
Liability Protection	\$100,000 each occurrence	
Premises Medical Protection	\$1,000 each person	
Fire Department Charges	\$500	
Building Codes	Not purchased*	
Loss Assessments	Not purchased*	
Satellite Dish Antennas	Not purchased*	

** This coverage can provide you with valuable protection. To help you stay current with your insurance needs, contact your agent to discuss available coverage options and other products and services that can help protect you.*



Your policy documents

Your Landlords Package policy consists of the Policy Declarations and the following documents. Please keep them together.

- Landlords Package Policy - AS84
- Policyholder Disclosure Notice of Terrorism Insurance Coverage - AP3337-4
- Additional Insureds Endorsement - AU267
- Additional Insured - Trust - AP4494
- Standard Fire Policy Provisions - AU277-2
- Landlords Package Policy Pennsylvania Amendatory Endorsement - AS122-2

Important payment and coverage information

Here is some additional, helpful information related to your coverage and paying your bill:

- Do not pay. Mortgagee has been billed.

Allstate Indemnity Company's Secretary and President have signed this policy with legal authority at Northbrook, Illinois.

A handwritten signature in black ink that reads "Julie Parsons".

Julie Parsons
President

A handwritten signature in black ink that reads "Susan L. Lees".

Susan L. Lees
Secretary



Policy Endorsement

Policy number:

801 489 539

Policy effective date:

August 22, 2021

*The following endorsement changes your policy.**Please read this document carefully and keep it with your policy.***Additional Insured—Trust - AP4494****I. In the General section, the following changes are made:**

Under the **Definitions Used In This Policy** provision, the following changes are made:

1. The following definitions are added:

Trust means the entity listed under Name of Trust, below.

Trustee means the person or entity listed under Name of Trustee, below, designated by the **trust**, as the trustee of the **trust** while lawfully acting within the scope of duties as trustee with respect to the **residence premises**.

2. The definition of insured person(s) is replaced by the following:**5. Insured person(s) means:**

- a) if **you** are shown on the Policy Declarations as an individual and **you** are a sole proprietor, **you** and **your** resident spouse.
- b) if **you** are shown on the Policy Declarations as a partnership or joint venture, the named partnership or joint venture, including any of its partners or members individually while acting within the course and scope of their duties in connection with the ownership, maintenance or use of the **residence premises**.
- c) if **you** are shown on the Policy Declarations as an organization other than a partnership or joint venture, the organization directors, trustees or governors of the organization while acting within the course and scope of their duties in connection with the ownership, maintenance or use of the **residence premises**.
- d) **your** employees, while acting within the course and scope of their employment in connection with the ownership, maintenance or use of the **residence premises**.
- e) any person or organization while acting as **your** real estate manager for the **residence premises**.

This policy does not apply to **bodily injury, personal injury or property damage** arising from the conduct of any partnership, joint venture or organization which is not named on the Policy Declarations as the insured.

Under **Section I—Your Property, Dwelling Protection—Coverage A and Other Structures Protection—Coverage B**, insured person also means a **trust** or **trustee**.

Under **Section I—Your Property, Personal Property Protection—Coverage C**, insured person also means a **trust** or **trustee** only with respect to **Property We Cover Under Coverage C** held solely by the **trust** at the time of loss.

Under **Section II—Liability Protection And Premises Medical Protection, Liability Protection—Coverage X**, insured person also means a **trust** or **trustee**, but only with respect to **bodily injury, personal injury or property damage** arising out of the operations necessary or incidental to the ownership, maintenance or use of the **residence premises**.

Under **Section II—Liability Protection And Premises Medical Protection, Premises Medical Protection—Coverage Y**, insured person also means a **trust** or **trustee**, but only with respect to **bodily injury** arising out of the operations necessary or incidental to the ownership, maintenance or use of the **residence premises**.

II. In Section I Conditions, the following changes are made:**A. The Our Settlement Of Loss provision is replaced by the following:****Our Settlement Of Loss**

We will settle any covered loss with **you** and the **trust** unless another payee is named in the policy. **We** will settle within 60 days after the amount of loss is finally determined by an agreement among **you**, the **trust** and **us**, an appraisal award, or a court judgment.

B. The No Benefit To Bailee provision is replaced by the following:**No Benefit To Bailee**

This insurance will not benefit any person or organization who may be caring for or handling **your** property for a fee. However, this provision does not apply to the **trust**.

III. In Section II—Liability Protection And Premises Medical Protection, under Liability Protection—Coverage X, Losses We Do Not Cover Under Coverage X, the following exclusions are added:

- A. **We** do not cover **bodily injury** to any employee of the **trust** or **trustee** unless the employee is performing duties arising out of and in the course of employment in connection with the maintenance or use of the **residence premises**.
- B. **We** do not cover **bodily injury, personal injury or property damage** arising out of any act or decision or failure to act or decide by the **trustee** in administering the **trust** other than as provided in **Section II—Liability Protection And Premises Medical Protection, Liability Protection—Coverage X**.

Name of Trust:

Andrew R Vara Esquire United State Trustee

Name of Trustee:

Esquire United State Trustee 200 Chestnut St

Mailing Address:

Suite 502 Philadelphia PA 19106



All other policy terms and conditions apply.



Policy number:

801 489 539

Policy effective date:

August 22, 2021

The following endorsement changes your policy.

Please read this document carefully and keep it with your policy.

Policyholder Disclosure Notice Of Terrorism

Insurance Coverage - AP3337-4

The federal Terrorism Risk Insurance Act, as amended, (the Act), establishes a temporary federal Program (the federal Program) providing for a system of shared public and private compensation for certain insured commercial property and casualty losses resulting from "acts of terrorism," as defined in the Act.

The Act, as amended in 2019, defines an "act of terrorism" as any act or acts that are certified by the Secretary of the Treasury—in consultation with the Secretary of Homeland Security, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion.

Your insurance coverage includes coverage for losses caused by "acts of terrorism" to which the federal Program applies. This coverage is subject to all other terms, conditions, limitations and exclusions of **your** policy.

Disclosure Of Federal Share Of Compensation For Insured Losses

Insured losses caused by "acts of terrorism" to which the federal Program applies would be partially reimbursed by the United States Government under a formula established by federal law. Under that formula, the United States Government generally reimburses 80% beginning on January 1, 2020, of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage.

You should also know that the Act, contains a \$100 billion cap that limits United States Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses in any one calendar year exceeds \$100 billion. If the aggregate insured losses for all insurers exceed \$100 billion, **your** coverage may be reduced.

Disclosure of Premium

The portion of **your** annual premium that is attributable to coverage for losses caused by "acts of terrorism" to which the federal Program applies is \$0.00.

Important notices

Policy number:

801 489 539

Page 1 of 1

Policy effective date:

August 22, 2021

**Allstate**

You're in good hands.

Dwelling ProfileYour Dwelling Protection-Coverage A limit is: \$230,426

The Dwelling Protection-Coverage A limit shown above, which is based on information that you have provided to us, is also shown on the enclosed Policy Declarations for your insurance policy.

The decision regarding the limit amount applicable to your Dwelling Protection-Coverage A is your decision to make, as long as, at a minimum, you purchase a Coverage A limit equal to the estimated cost as determined by Allstate and do not exceed maximum coverage limitations established by Allstate (we will let you know if the amount of insurance that you request is greater than that which we allow).

It is important to keep in mind that the minimum Coverage A limit for which we will insure your property reflects an estimated replacement cost based on selected data that was available to us when we made this estimate (this information is described further in the "Rating Information" section of your Policy Declarations). The actual amount it will cost to replace your covered property cannot be known until after a covered total loss has occurred, so it is important that you let us know now, before a covered total loss occurs, if you would like to change your Coverage A limit.

How is the replacement cost estimated?

Many factors can affect the cost to replace your property, including age, size, and type of construction. For example, the estimated replacement cost uses construction data, such as labor and materials that are available to us when we made this estimate. This estimate is also based on characteristics of the property, which include information that you provided to us. Please note that if you have chosen to insure your dwelling for a limit that is greater than our estimate (which is the minimum amount for which we will insure your dwelling), the amount shown above actually reflects this higher amount. If you would like to make any changes to the Coverage A limit, please contact us.

Note to customers renewing their policy

The estimated replacement cost for your property may have changed since your last renewal. This is because Allstate uses the property characteristics that you have provided to us to recalculate and update the estimated replacement cost. Using updated labor and material rates for your zip code, Allstate takes the property characteristics that you have provided and determines the updated estimated replacement cost. The information about your property's characteristics is provided in the "Rating Information" section of your Policy Declarations.

Please note: Your Dwelling information is used to estimate your home replacement cost. It's important to review and update this information so we're using the most accurate details to estimate your home's replacement value.

If the information about your property shown in your Declarations requires any change or if you have any questions or concerns about the information contained in this Important Notice, please contact your Allstate representative.

X67676-4

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#

ALLSTATE INDEMNITY COMPANY

Calendar Date: 07/07/2021

Home Office

Policy Number: 801489539 08/22

LANCASTER, PA

Insured : YOAN HENRIQUEZ

Address : 1001 SUFFOLK DR

City : LITITZ

St.: PA Zip Code: 17543

ADD ADDITIONAL INSURED # 1

Trust/Trustee

Trust Name: ANDREW R VARA ESQUIRE UNITED STATE TRUSTEE

Trustee Name: ESQUIRE UNITED STATE TRUSTEE200 CHESTNUT ST

Address: SUITE 502

City: PHILADELPHIA

State: PA

Zip: 19106

REMARKS

SUPPORT CENTER REMARKS

DUE TO NO PREMIUM CHANGE EFFECTIVE DATE HAS BEEN CHANGED FROM 07/08/2021 TO 08/22/2021

Conditions respecting Binder - Such insurance as may be bound by this service request:

1. is afforded in reliance by the Company on the statements made by the Insured;
2. shall be effective on the date, and at the time stated, but in no event sooner than such date and time.
3. is subject to the terms, exclusions and conditions of the Company's policy form, and of the forms and endorsements approved for use with such policy.
4. is limited to a period of thirty (30) days, beginning with the effective date hereof and expires at 12:01 A.M. Standard Time with respect to the designated property insurance policy on the last day of such limited period; provided, however, that the Company may sooner terminate such insurance by mailing to the Insured, at the address stated, written notice of rejection of this Service Request.

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+

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#

ALLSTATE INDEMNITY COMPANY

Calendar Date: 07/07/2021

Home Office

Policy Number: 801489539 08/22

LANCASTER, PA

Insured : YOAN HENRIQUEZ

Address : 1001 SUFFOLK DR

City : LITITZ

St.: PA Zip Code: 17543

THIS REQUEST IS SUBJECT TO POLICY TERMS AND IS EFFECTIVE ONLY IF THE POLICY NOTED ABOVE IS CURRENTLY IN FORCE

Effective 11 :23 AM 07/07/2021

Policyholder's Signature

HERMES ALMAGUER

Agent/Agency Name

0A8873
Agent #

X5D
Location

(717) 286-1616
Agent's Phone #

+

+

YOAN HENRIQUEZ		00-205 6004	551
DEBTOR-IN-POSSESSION CASE NO. 20-12166PMM		313	
CHECKING ACCOUNT			
1001 SUFFOLK DR.		DATE	
LITITZ, PA 17543			
PAY TO THE ORDER OF	Void	\$	
M&T Bank		DOLLARS	MyChoice Premium
MEMO			
⑆031302955⑆		9883095557⑆055⑆	

YOAN HENRIQUEZ 07-21		00-205 6004	551
DEBTOR-IN-POSSESSION CASE NO. 20-12166PMM		313	
TAX CHECKING ACCOUNT			
1001 SUFFOLK DR.		DATE	
LITITZ, PA 17543			
PAY TO THE ORDER OF	Void	\$	
M&T Bank		DOLLARS	
MEMO			
⑆031302955⑆		9883095540⑆055⑆	

In re Yoan Henriquez
Debtor

Case No. 20-12166-PMM

CASH FLOW PROJECTIONS FOR THE 12 MONTH PERIOD: June 24 through June 30

This schedule must be filed with the Court and a copy submitted to the United States Trustee within 15 days after the order for relief. Amended cash flow projections should be submitted as necessary.

	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Month	Total
Cash Beginning of Month												
RECEIPTS												
CASH SALES	\$13,039											
ACCOUNTS RECEIVABLE												
LOANS AND ADVANCES												
SALE OF ASSETS												
OTHER (ATTACH LIST)												
TOTAL RECEIPTS												
DISBURSEMENTS												
NET PAYROLL												
PAYROLL TAXES												
SALES, USE, AND OTHER TAXES												
INVENTORY PURCHASES												
SECURED/RENTAL/LEASES												
INSURANCE	\$699.35											
ADMINISTRATIVE & SELLING												
OTHER (ATTACH LIST)	\$3,543											
PROFESSIONAL FEES												
U.S. TRUSTEE FEES												
COURT COSTS												
TOTAL DISBURSEMENTS	\$4,242.35											
NET CASH FLOW	\$8,796.65											
(RECEIPTS LESS DISBURSEMENTS)												
Cash End of Month												

OTHER LIST

CONTRACTOR:

MARIA ESTHER ROQUE LOPEZ: \$1380

MIRAI DYS PANTOJA ROQUEZ: \$1200

HOTEL: 427

MEAL: \$96

GAS: \$240

